

## **Factors Influencing Parents' Perceptions and Behaviors Regarding the Threat of Sexual Abuse**

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### Statement of the Research Problem

In the last several years, prevention programs have been developed in the area of child sexual abuse. Almost exclusively, the primary aim of programs has been to educate children about abuse. Less frequently, parents have been targeted for educational efforts. Increasingly, however, the key role of parents in the prevention of sexual abuse is being recognized (Reppucci, Jones, & Cook, 1994; Wurtele & Miller-Perrin, 1992), yet little is known about parents' understanding of the problem of sexual abuse, their perceptions of the problem as a risk in their children's lives, and their unprompted protective strategies. This study was designed to elicit parents' understanding of the problem, their perception of risk, their protective behaviors, and influences on perception and behavior. Concepts from the literatures on risk perception and health behavior were used to provide theoretical guidance to the study. These literatures have examined numerous risks to determine the influences on perception and behavior (Slovic, Fischhoff, & Lichtenstein, 1982; Weinstein, 1989); heretofore, this literature has not been explicitly applied to sexual abuse.

### Research Questions

- 1) What are parents' perceptions of the probability and severity of child sexual abuse?
- 2) How do parents conceptualize the hazard of child sexual abuse?
- 3) What psychological, sociological, and cultural explanations can be found in parental accounts of their risk perceptions?
- 4) How do conceptualization of the problem, assessment of the probability and severity, and psychological, social and cultural factors relate to parental protective behavior?

### Methodology

Qualitative methods were determined to be the most appropriate means to gain an understanding of perception and behavior from the parents' perspective. As noted, little is

known about parents' protective strategies for preventing the sexual abuse of their children. An inductive approach was therefore needed to elicit from parents their cognitive belief systems and naturally-occurring protective behaviors. Moreover, the literature on perception of hazard and behavioral response has noted that individual conceptualizations often have an impact on whether a risk is perceived and acted upon. Semi-structured interviews, therefore, were determined to be the best means of collecting information on understanding, perceptions, and self-reported behaviors.

Chicago-area parents with preschool-age children were the target sample for the study. A day care information and referral agency was used to select pre-schools in each of five community areas. Directors at the sites provided assistance in gaining the cooperation of individual parents. Because of the exploratory nature of the study, maximum variation sampling was used to obtain a highly diverse sample. This technique calls for sequential sampling of subjects to develop a sample that is diverse on key characteristics (identified in this study as gender, ethnicity/race, sexual abuse history, and age).

The final sample included 24 parents: 19 women and 5 men; 14 blacks, 7 whites, and 3 white-Hispanics; 11 currently married parents and 13 who were currently single, separated, or divorced. The sample was diverse in terms of religion, income, and education. Regarding sexual abuse history, eight parents described an abusive incident that had occurred prior to age eighteen. In the later stages of data collection, the sample appeared quite varied on the characteristics of ethnicity, gender, socio-economic status, family composition, and victimization experience. However, most parents were in their thirties; consequently, sampling was expanded to include participants in a teen parenting program.

An interview guide was constructed based on the research questions, a literature review, and two pretest and five pilot interviews. The final instrument consisted of questions covering eight major areas: current risks facing children, probability of risks, meaning of child sexual abuse to the parents, personal experience with abuse, sources of information about abuse, cultural views of parenting, views of violence, and protective strategies. The average length of each interview was ninety minutes. Most interviews took place in a private space at the child care center or teen parent center, although several took place in respondent homes or coffee shops. Interviews were tape recorded for all but one case.

Analysis of data was conducted concurrently with data collection to begin the identification of categories, explore linkages, and inform on-going sample selection and data collection. An initial coding scheme was developed based on the literature review, the conceptual framework, the research questions, and the findings from the pilot study. The constant-comparative method of coding was used in which each unit of text was compared with those already coded to develop and refine coding rules (Glaser & Strauss, 1967; Lincoln & Guba, 1985).

The final coding scheme included major codes such as: Risk, Probability, Victim Description, Beliefs, and Protection. Within these major categories, there were several

secondary and sometimes tertiary codes. Although the first level of codes were developed a priori, the more refined codes were derived and named as the interview transcripts were reviewed. To provide a measure of reliability, two individuals coded each transcript. The rate of agreement was 80%, calculated as the ratio of agreements to the total number of possible units of coded text. Additionally, measures suggested by Lincoln & Guba (1985) were used to enhance the "trustworthiness" of the study. These measures included checking data interpretation with respondents during the course of the interview and in follow up interviews with a subset of respondents, utilizing a "peer-debriefer" to serve as a check on bias, and conducting negative case analysis (i.e., review of cases that did not fit the developing analysis and accounting for divergence in the developing theory).

## Results

Question 1: Perception. Parents' perceptions of risk in the general population were highly variable. The quantitative prevalence estimates that parents gave for girls ranged from a low of 1% to a high of 90%, with a mean estimate of 36% and a median of 30%. The estimates given for boys ranged from 1% to a high of 60%, with a mean estimate of 25% and a median of 18%. There was a lack of congruence between parents' perceptions of risk for the general population and their perceptions for their own child. Despite generally high prevalence estimates, only one parent viewed child sexual abuse as a major risk (i.e., overwhelming or immediate threat) facing her child. Ten parents viewed sexual abuse as a moderate risk facing their children (moderate was defined as those who could conceptualize current circumstances in which their children might be at risk). Nine parents perceived it to be only a slight risk (defined as viewing their child as safe from sexual abuse at this point in time). Although several parents imply that their children are at less risk than other children, four parents stated explicitly that they were concerned about the risk of child sexual abuse for other children, but not for their own.

Parents' responses suggested several reasons for the discrepancy between perceptions of risk for the general population and perceptions of personal risk. These included beliefs that they were better parents than others, that their children were more capable of self-protection, and that their protective behaviors were effective. In comparison with other risks facing children (e.g., street violence, illness, accident) some parents viewed sexual abuse to be the more pervasive threat while others felt more capable of protecting their child from abuse than from other types of risk.

Question 2: Conceptualization. Parents demonstrated wide variation in the complexity with which they viewed the problem of child sexual abuse. In general, those who had either personal experience or access to more sophisticated knowledge typically had a broader view of the problem. Yet, even parents with a comparatively greater understanding of the complexity of sexual abuse still tended to initially offer a stereotypical portrayal of abuse (i.e., a "sick" man who commits violent sexual offenses against young, primarily female, children). Although this

conceptualization was the most common, when asked directly, most parents acknowledged that sexual abuse includes a wide range of activity, can be committed by females, that victims can be males, that it is usually committed by somebody the child knows, and that physical force is rarely used.

To ascertain parents' understanding of risk factors for sexual abuse, parents were asked whether they felt some children were at greater risk for sexual abuse than others. Most of the risk factors that parents mentioned focused on either victim or family characteristics. Victims' gender, age, and personality were the key individual-level risk factors. Discussion of family risk factors focused primarily on family behavior which put a child at risk, rather than descriptive characteristics. Several parents compared the supposed dysfunctional (e.g., drug abusing, uninvolved parents) family to their own lifestyle, and consequently viewed their own child at less risk.

More revealing than the identification of risk factors, however, were the comments of the seven parents who felt all children were at equal risk of victimization. One parent, a father, made an important distinction; he felt the risk for approach was the same for all children, but the risk of completed abuse was dependent on the parent's efforts to instruct their child how to handle the situation. The remaining six parents seemed hesitant to name risk factors as if to do so implied that the victim was responsible (e.g., "I don't think no one really [is at risk], I can't really say, I guess no one asks to be bothered"). This viewpoint seemed particularly true for all four of the young mothers. The context of many of their statements described the similarities of rape and child sexual abuse, and discussion of "fault." In general, these statements suggested that some parents may have difficulty with the concept of risk as a probability of occurrence rather than as a condition attached to blame.

Question 3: Explanations. Numerous psychological, sociological, and cultural influences appeared related to parental perceptions and behaviors. Personal victimization, media stories, lessons learned from parents, information from social networks, and cultural belief systems regarding the nature of children and the role of parents were some of the influences described by parents.

The influence of personal victimization experience appeared in four main ways: parents' general conceptualization of abuse (i.e., more complex than stereotypical), direct correspondence between parents' victimization scenarios and their protective behavior (e.g., statements that they act in a certain protective manner to guard against the type of victimization they experienced), their assessments of the trustworthiness of caretakers, and emotional effects of victimization that may be a barrier to, or a facilitator of, protective behavior. Key elements of personal experience that appeared to influence parents' protective behaviors were the nature of the perpetrator-victim relationship, the perceived quality of the confiding relationship between parent and child, and the perceived reasons why one was victimized.

The impact of the media was apparent in a variety of ways and included providing useful information to parents as well as providing distorting information. Ten parents seemed only

slightly affected by the media (few references to highly publicized cases and little indication of learning from media sources), although no one escaped completely from media influence. It appeared that for these parents, the media impact was tempered by other knowledge. Conversely, the impact of the media was particularly strong for those who had no other manner of learning about sexual abuse; parents who lacked additional sources of information about abuse tended to estimate high prevalence rates, describe especially severe cases, and verbalize extreme levels of distrust.

Six parents said that they had learned something about child sexual abuse from their own parents when they themselves were children. Parents were also asked about the more general kinds of protection strategies their own parents employed. Warnings about strangers were the most common although the reason for the warnings was generally not explained. Also common, and again unexplained, were limits to the child's activities. In particular, the parents of the women would not allow their daughters to spend the night at people's houses, to go certain places, or to participate in certain activities. None of the men faced the same strict supervision when growing up. On the contrary, they all talked freely that, unlike today, when they were children they could go anywhere in safety.

Social networks were not a common source of information about child sexual abuse. Most of the information-sharing among social networks seemed to deal with general parenting issues (e.g., discipline strategies) rather than sexual abuse specifically. When parents did talk about sexual abuse with members of their social network, conversations tended to center on media stories. Parents did not report any sharing of preventive or protective behavior among members of their social networks.

Finally, parents were asked several questions to tap into cultural beliefs regarding views on parenting, children, discipline, sexuality, and violence. The area that appeared most related to their perceptions and protective behaviors was their view on the nature of children, and consequently children's capacity for self-protection. While some parents viewed children as having limited capacity for protection due to their trusting nature, lack of reasoning ability, and difficulty following instructions, others viewed children as easily taught and highly intuitive regarding possible dangers. In terms of protective philosophies, parents discussed both parent-centered approaches (i.e., focused on their own awareness and responsibilities for protecting their child) and child-centered approaches (i.e., empowering the child and making him/her aware).

Question 4: Behaviors. Most of parents' protective behaviors involved the expansion of generally protective behaviors to include the risk of sexual abuse. These behaviors included providing supervision, developing a strong relationship, and taking an active interest in the child's life. Additionally, some parents employed specific sexual abuse prevention techniques (e.g., educating their child about abuse). Parents also discussed the means by which they assessed the trustworthiness of caretakers (e.g., intuition, evidence of good lifestyle, development of relationship over time).

In terms of the relationship between perception and behavior, in some cases there was evidence of a direct link between perception of risk and the adoption of protective behaviors. Generally, this relationship appeared at the extremes of risk perception. In other cases there was evidence that instinct or cultural pattern can influence protective behavior without cognitive processing of risk (i.e., following the protective behavior patterns of one's parents). Conversely, barriers (e.g., lack of social support) can impede the adoption of protective behavior even when risk is perceived. Finally, the relationship between perception and behavior can be reciprocal; acting to protect one's children reduces the perception that they are at risk.

#### Utility For Social Work Practice

Social workers are frequently involved in the design of prevention programs generally, and sexual abuse prevention programs specifically. The current study provides information about how parents view sexual abuse, how they respond to the threat of potential abuse, and some barriers to both perception and protective behavior. While the study evidence suggested that parents recognized child sexual abuse as a serious threat to children in society, the relevance of the threat as a problem in their own child's life varied amongst parents. This study has provided several possible explanations for the variation. Such information can be used in the design and improvement of child sexual abuse prevention programs.

By providing information about a potential target population the study embodies social work values regarding client input into programs, emphasis on cultural understanding and parental strengths in program design, and respect for individuals' interpretation of their life. Qualitative methods are particularly useful for attempting to understand a subject from another's point of view and might be appropriate for program design aimed at other social problems and client populations.

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